

Maricopa County Justice Courts, State of Arizona

REQUESTS FOR REASONABLE ACCOMMODATIONS FOR PERSONS WITH DISABILITIES MUST BE MADE TO THE COURT AT LEAST 3 JUDICIAL DAYS IN ADVANCE OF ANY SCHEDULED HEARING.	CASE NUMBER:
Plaintiff(s) Name / Address / Phone	Defendant(s) Name / Address / Phone The Statutory Agent / Corporate Officer to be served is:
WARNING: THERE ARE NO APPEALS IN SMALL CLAIMS CAS Officer or the Justice of the Peace in Small claims (Division have your case transferred to the Civil Division of the J transfer at least ten (1 0) days prior to the day of the s	
TO THE ABOVE-NAMED DEFENDANT(S): You are directed to answer this complaint within TWEN ⁻	AND SUMMONS TY (20) DAYS by filing a written ANSWER in the court named of having a judgment entered against you for the amount of at the time your answer is filed.
Date: Clerk	(SEAL)
This Justice Court has venue because	
	Plaintiff
I am answering on behalf of Myself Marital Con	PANT'S ANSWER A filing fee must be paid at the time your answer is filed mmunity Other: I do not owe the ature of both husband and wife)
	Defendant(s)
NOTICE I certify that I will mail a copy of this answer to the plaintiff at the a	OF SERVICE above address.
Date: Dvr.	Defendant